

	CERTIFICATED COMPA	NY INFORMATION	
Grassh	nopper Group, LLC		
Compa	ny Name	FEIN/SSN (800) 820-8210	
 Dba/fka	3	Telephone #	
	t Avenue, Suite 200		
	Address		
	nam, Massachusetts 02494		
City, Si	tate, Zip Code		
Busine	ess Location		
City S	tate, Zip Code	County	
Oity, O	tato, 21p 0000		
	REGISTERED AGEN	T INFORMATION	
Doniet	ered Agent: Corporate Filing Solutions, LLC		
_			
Mailing	g Address: 317 Ruth Vista Road		
	oton, South Carolina 29073 State, Zip Code		
reuant	to the Commission's rules and regulations, pr	rint or type company contact for the following are	
A.	General Manager (Include Address if different		
	Telephone Number / Facsimile Number	/ E-mail Address	
B.	Customer Relations/Complaints Representative (Include Address if different than above)		
	Telephone Number / Facsimile Number	/ E-mail Address	
C1.	Customer Relations/Complaints Representa	ative for Escalated Complaints (Include Address it	
01.	different than above)		
		/	
	Telephone Number / Facsimile Number	/ E-mail Address	
00	Contract (Tall Ergo Number)		
C2.	Customer Contact (Toll Free Number)		
D.	Engineering Operations (Include Address if	f different than above)	
	/		
	Telephone Number / Facsimile Number	/ E-mail Address	
E	Test and Repair (Include Address if different	than above)	
E.	/ (include Address in different	/	
	Telephone Number / Facsimile Number	/ E-mail Address	
F.	Emergencies (During Non-Office Hours)	1	
	The state of the s	/ / E-mail Address	
	Telephone Number / Facsimile Number	/ E-mail Address	

In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:

	1420 Spring Hill Road, Suite 401, McLean, Virginia 22102			
G.	Regulatory Officer (Include Address if diffe	Regulatory Officer (Include Address if different than above)		
	(703) 714-1309 / 703-714-1330	/ vmp@commpliancegroup.com		
	Telephone Number / Facsimile Number	/ E-mail Address		
	The Commpliance Group			
H.	Dual Party Mailings (Name)			
	1420 Spring Hill Road, Suite 401, McLean, V	/irginia 22102		
	(Mailing Address)	-		
	<u>(703) 714-1309</u> / 703-714-1330	/ vmp@commpliancegroup.com		
	Telephone Number / Facsimile Number	/ E-mail Address		
	The Commpliance Group			
l.	Interim LEC Fund Mailings (Name)			
	1420 Spring Hill Road, Suite 401, McLean, V	/irginia 22102		
	(Mailing Address)			
	(703) 714-1309 / 703-714-1330 Telephone Number / Facsimile Number	/ vmp@commpliancegroup.com		
	•	/ E-mail Address		
J.	The Commpliance Group			
J.	Universal Service Fund Mailings (Name)	Virginia 20400		
	1420 Spring Hill Road, Suite 401, McLean, V (Mailing Address)	irginia 22102		
	(703) 714-1309 / 703-714-1330	/ ymp@commpliencegroup acces		
	Telephone Number / Facsimile Number	/ vmp@commpliancegroup.com / E-mail Address		
	The Commpliance Group	/ E-mail Address		
K.	Gross Receipts Mailings (Name)			
	1420 Spring Hill Road, Suite 401, McLean, V	iroinia 22102		
	(Mailing Address)	ngma EZ 10Z		
	(703) 714-1309 / 703-714-1330	/ vmp@commpliancegroup.com		
	Telephone Number / Facsimile Number	/ E-mail Address		
	The Commpliance Group			
L.	Lifeline Mailings (Name)			
	1420 Spring Hill Road, Suite 401, McLean, Virginia 22102			
	(Mailing Address)			
	<u>(703) 714-1309</u> / 703-714-1330	/ vmp@commpliancegroup.com		
· - · - · -	Telephone Number / Facsimile Number	/ E-mail Address		
	Vineetha Pillai	/		
	This form was completed by	Signature		
	Regulatory Consultant	/ July 31, 2013		

RETURN COMPLETED FORM TO:

Title

Public Service Commission of SC

Date

Docketing DepartmentPost Office Drawer 11649
Columbia, South Carolina 29211

And
Office of Regulatory Staff
Attn: Jeanne Gordon
1401 Main Street, Suite 900
Columbia, South Carolina 29201